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PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number 8404.001					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY				OTHER T	
FOR NUMBER FILED					NUMBER EXTRA				RATE		FEE .		RATE	FEE .
BASIC FEE (37 CFR 1.16(a))					- 3						s <u>0</u>	OR	0	\$ <sub>.</sub> 0
TOTAL CLAIMS (37 CFR 1.16(c)) 24			minu	s 20 =	* 4			x \$ <u>9</u> =		=	0 ·	OR	x <u>\$ 18</u> =	72
INDEDENDENT OF AIMS			us 3 =   * 1 .			A	x 43 _=		_	0	OR	x 86 =	86	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)					d)) O			+ 140 = 0		0	OR	+ 280 =	0	
* If the difference in column 1 is less then zero, enter "0" in column 2									TOTA	L	0 .	OR	TOTAL	158
CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY														
	· · · · · · · · · · · · · · · · · · ·	(Column 1)	·	(Col	(Column 2) (Column 3)			7		JE ENTIL I		1	SMALL E	NTITY .
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NU PREV	GHEST IMBER IOUSLY ID FOR	PRES EXT			RATI		ADDI- TIONAL FEE	OR OR OR	RATE	ADDI- TIONAL FEE
	Total, (37 CFR 1.16(c))	*	Minus	** 2	0	=	0		x \$_9	<u> </u>	)		x \$ 18 =	0
	Independent (37 CFR 1.16(b))	*	Minus	*** 3	•	=	0		x <u>43</u>	C	).		x <u>86</u> =	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							Ш	+ 140	_= (	0 .	OR	+ <u>280</u> =	0
											0			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	, .	HIC NU PREV	GHEST JMBER /IOUSLY ID FOR	PRES EXT	ENT		RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	** -:		=			x \$ <u>9</u>	=	0		x \$ <u>.18</u> =	0
	Independent (37 CFR 1.16(b))	*	Minus	***	1	=	• (		x <u>43</u>	_=	OR	x <u>86</u> =	0	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							1	140	=	0 .	OR .	+ 280 =	0
*		(Column I)	•	(Col	lumn 2)	(Colun	ın 3)	ΑĪ	TOT. DDIT. FI		)	ORA	TOTAL DDIT. FEE	0
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT	-· ·	HIC NU PREV	GHEST JMBER JIOUSLY ID FOR	PRES EXT	ENT		RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1,16(c))	*	Minus	**		.=			x \$ <u>9</u> =	.=	0	OR OR OR	x \$ <u>18</u> =	0 .
	Independent (37 CFR 1.16(b))	*	Minus	***		=				.=	0		x <u>· 86</u> =	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + 140 = 0								0	OR	+ _280=	0		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  TOTAL 0 OR TOTAL 0 ADDIT. FEE ADDIT. FEE											0			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			96		,			RATE	FEE	7	RATE	FEE	
FC	DR	, .	NUMBER FILED		NUMB	MBER EXTRA		BASIC FEE		OR	BASIC FEE		
TC	TAL CHARGE	ABLE CLAIMS	W mir	nus 20=	. 6			X\$ 9=		OR	X\$18=	72	
INE	DEPENDENT C	LAIMS .	4 mi	nus 3 =	*/			X43=		OR	X86=	816	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in co						olùmn 2		TOTAL		OR	TOTAL	978	
CLAIMS AS AMENDED - PART II								OTHER THA  SMALL ENTITY OR SMALL ENTI					
_	1	(Column 1)	<del></del>	(Colun		(Column 3)	RATE	SMALL		OR 1	SWALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVICE PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		.=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MI	Minus	***	CLAIM	= '		X43=		OR	X86=		
	FIRST PRESE		JUIPLE DEF	ENDENT			1	+145=		OR	+290=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)						,	, FEE			ADDN. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>!</b>						
			*					+145=		OR	+290=		
	x •		*	•			· 🛕	TOTAL DDIT. FEE		OR -	TOTAL ADDIT. FEE	- 1	
		(Column 1)		(Colum		(Column 3)					•	,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
		nn 1 is less than th					L	TOTAL		L	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													